City of Marlborough Community Development Department Application for Downpayment Assistance

Name	Home Phone		
Current Address	nt Address Work Phone		
City, State, Zip	W SHOULD BE PRO	Persons in I y member of your househo VIDED FOR ANY PERSO	Household old who is currently employed. \tilde{\chi} ON(S) WHO WILL BE RESIDING
	YOURSELF	HOUSEHOLD MEMBER	HOUSEHOLD MEMBER
Name			
Occupation			
Employer			
Employer Address			
Employer Phone			
Total Annual Salary			
Hire Date			
Please list any other sourc support, alimony, wages fr			e pension, Social Security, interest,
Please list all persons in yo you. Your list should incl			only those persons who will be living
Name	Relationship	Name	Relationship
Diagram and delice 12 of	on to Commit D. J.	annuart Description (CC) II	Iall 140 Main Street M. II
Please send this application 01752. Date	on to Community Devel _ Signature	opment D epartment, City F	Hall-140 Main Street, Marlborough,

Please include the following in your application package:

- 1. Copies of one month's most recent paystubs for each borrower along with two years' W-2. Last 2 years tax returns.
- 2. Applicants employed by family-owned business must also provide two years' signed federal tax returns, all schedules, with two years' W-2s.
- 3. Self-employed applicants must provide two years' signed federal tax returns, all scheduled and a year-to-date balance sheet through the most recent quarter. If incorporated, applicants must provide two years' signed corporate returns, all schedules and a corporate balance sheet through the moist recent quarter in addition to personal information.
- 4. A signed Purchase and Sale (P&S).
- 5. A commitment letter from your lending institution showing the financial arrangement including the downpayment and closing cost requirements